TRA	NSMITTAL O	Docket No. 04995/128001							
In Re Application Of: Toshiaki IRIE									
	Serial No.	Filing Date Herewith	Examiner	Group Art Unit	nit				
Title:	COMPOSITE AU	DIO-VIDEO APPARATUS							
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	Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
		37 C	FR 1.97(b)						
1. 🛚	1. The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.								
		37 (CFR 1.97(c)						
2.									
	☐ the stater	ment specified in 37 CFR 1.97(e)	;	•					
		OR							
	☐ the fee se	et forth in 37 CFR 1.17(p).							
			P,A	22511 ATENT TRADEMARK OFFICE					

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT Docket No. (Under 37 CFR 1.97(b) or 1.97(c)) 04995/128001 In Re Application: Toshiaki IRIE Serial No. Filing Date Group Art Unit Examiner Herewith **COMPOSIT AUDIO-VIDEO APPARATUS** Payment of Fee (Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p)) A check in the amount of is attached. The Director is hereby authorized to charge and credit Deposit Account No. 50-0591 as described below. Charge the amount of Credit any overpayment. Charge any additional fee required. Certificate of Transmission by Facsimile* Certificate of Mailing by First Class Mail I certify that this document and authorization to charge deposit I certify that this document and fee is being deposited account is being facsimile transmitted to the United States with the U.S. Postal Service on Patent and Trademark Office (F: as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. (Date) Signature of Person Mailing Correspondence Signature Typed or Printed Name of Person Signing Certificate Typed or Printed Name of Person Mailing Certificate *This certificate may only be used if paying by deposit account. Illishes Dated: Signature Jonathan P. Osha, Reg. No.: 33,986 ROSENTHAL & OSHA L.L.P. 1221 McKinney Street, Suite 2800 Houston, TX 77010 Tel: 713-228-8600 Fax: 713-228-8778 CC:

INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

Docket Number (Optional) 04995/128001	Application Number	
Applicant(s) Toshiaki IRIE		·
Filing Date	Group Art Unit	-

					Filing Date Herewith		Group Art Unit		
				U.S. PATENT DOCUMENTS					
EXAMINER INITIAL	REF	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING	DATE OPRIATE	
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	REF	DOCUMENT NUMBER	10/31/1995 Jap	COUNTRY	CLASS	SUBCLASS 9/00	Translation		
	A1	7-288873*		Japan	H04Q		YES	NO J	
				OTHER DOCUMENTS (Inclu	ding Author, Title,	Date, Pertinent Pa	l nges, Etc.)		
		* Relevancy described	l at page 2 of spec						
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EXAMINE	R			DATE CONSIDERED					

EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP Section 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.